

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 314 Action Fund			FEC IDENTIFICATION NUMBER ▼ C C00633248		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y					
Full Name of Payee Dover Strategy Group			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 19 / 2026		
Mailing Address 1570 Michigan Blvd			Amount 50000.00 		
City State Zip Code Dunedin FL 34698-2336		Transaction ID : 500104549 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2026			
Purpose of Expenditure Advertising		Category/ Type		Name of Federal Candidate STANFORD, ALA, DR., , ☒ Support ☐ Oppose	
Office Sought: ☒ House ☐ Senate ☐ President ☐ Senate		District: 03 State: PA			
Calendar Year-To-Date Per Election for Office Sought 2620880.08 			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City State Zip Code		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y			
Purpose of Expenditure		Category/ Type		Name of Federal Candidate	
Office Sought: ☐ House ☐ Senate ☐ President ☐ Senate		District: State:			
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 50000.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 50000.00 					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Signature Roberson, John, , , Date M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2026					